

**From:** "Stan Shatenstein" <[shatensteins@sympatico.ca](mailto:shatensteins@sympatico.ca)>

**To:** [Undisclosed-Recipient:](#)

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**Subject:** STAN Bulletin: 15th Edition: 16-July-2012

## Smoking & Tobacco Abstracts & News

**STAN Bulletin**

**15th Edition**

**16-July-2012**

**Editor's note:** While many jurisdictions now have fairly comprehensive legislation protecting people from secondhand smoke, the [appalling story](#) of people smoking just outside a maternity ward in Scotland shows just how much work remains to be done.

Stan Shatenstein

### In the News:

- Australia: [Sunday Telegraph: Opinion: Where there's smoke there's cash: Taxes don't add up](#)
- Australia: [Customs to struggle with long queues as travellers arrive with too many duty-free cigarettes](#)
- EU: [Economic Downturn Inflates Black Market for Cigarettes, Creates Unlikely Smugglers](#)
- India: Chennai: [Adyar Cancer Institute survey reveals passive smoking affects 40% of city youth](#)
- India: [ITC/WBC: Sustainable Development: The curious case of tobacco companies & eco prizes](#)
- Rwanda: [Public Places Smoking Ban Bill Lingers in Parliament, Draft Under Reassessment](#)
- UK/US: [ALEC: Free market group supported by Koch brothers tries to block plain pack cigarettes](#)
- UK: [Manufacturer looking at printed electronics to circumvent plain packaging regulations](#)
- UK: Scotland: [Anger at smoke-filled ward where babies inhale first breaths](#)
- UK: Scotland: [The Answer is Plain: Teen takes on tobacco companies after cancer kills mother](#)
- US: [Moody's: Tobacco Bonds Face Default as Smoking Declines, May Be Doomed](#)
- US: [RAI: Reynolds American: Camel Cash: Court rekindles lawsuit over cigarette loyalty program](#)
- US: [Tobacco use more prevalent among African-American adolescents in public housing \[Addict Behav - Yu\]](#)
- US: NH: [Concord Monitor: Opinion: Legislature let health go up in smoke; Tax cut hurts public health](#)
- US: VA: [PM: Landmark Theater: Altria Group donates naming rights funds: No logos or advertisements to appear](#)

### Noteworthy:

"The current study suggests that marketing in the form of pack branding remains a potent tool for increasing the appeal of tobacco products to young women and may serve as inducement to smoke for many. The findings indicate that branded female-oriented cigarette packs were perceived by female youth as significantly more appealing, better tasting, and associated with lower levels of health risk than plain packaging or male-oriented packaging. Branded female packs were also associated with more positive smoker images, including glamour, sophistication, popular, and slimness—measures commonly used by the tobacco companies when market pretesting brands... Removing brand descriptors from packs significantly reduced measures of appeal and taste. Reductions were the greatest for brands with flavor descriptors, such as cherry and vanilla. This is consistent with previous research indicating that flavors are particularly appealing to youth and young adults." [Hammond D, Daniel S, White CM. The Effect of Cigarette Branding and Plain Packaging on Female Youth in the United Kingdom, [JAH](#)]

### In this Edition:

- Addiction - Sarkar: India: FCTC/MPOWER: Priorities for tobacco control research
- BJOG - Myung: Efficacy & safety of pharmacotherapy for pregnant smoker cessation: meta-analysis
- Bull Environ Contam Toxicol - Rahman: Bangladesh: Kushtia District: Pesticide Residues in Tobacco Leaves
- Cochrane Data Syst Rev - Park: Enhancing partner support to improve smoking cessation
- Drug Alc Depend - Shiffman: US: Smoking motives of daily & non-daily smokers: Profile analysis
- Environ Health - Letašiová: Bladder cancer: review of environmental risk factors

- Eur Child Adol Psych - Sourander: Finland: Adolescent mental health & alcohol & tobacco use: 10-year trend
- Eval Prog Plan - Satterlund: US: CA: TCEC: Accommodating client needs in evaluation capacity building
- Health Place - Klein: US: Midwest: Young adult perceptions of smoking in outdoor park areas
- Health Psych - Hertel: US: IL: Chicago: Smoker identity & escalation among adolescents
- JAH - Hammond: UK: Effect of Cigarette Branding & Plain Packaging on Female Youth
- J Bras Pneumol - Faria: Brazil: Smoking & abdominal fat in male blood donors
- J Dev Behav Pediatr - Forza: Italy: Veneto: Smoking in early & mid-adolescence
- JNCI - Wild: NCD: Role of Cancer Research in Noncommunicable Disease Control
- J Thorac CV Surg - Jacobson: US/NA: AATS: Guidelines: Low-dose CT-scans for lung cancer
- J Thromb Thrombol - Rakowski: STEMI: Smoking impact on primary percutaneous coronary intervention
- Lung - Krell: Effect of Smoking & Gender on Pulmonary Function & Clinical Features in Sarcoidosis
- Neuropsychol - Harakeh: NL: TRAILS: Association Between Neurocognitive Functioning & Adolescent Smoking
- Neurosci - Ashor: Iraq: ADHD: Variable influence of degree of smoking dependence in medical students
- Nihon Eiseigaku Zasshi - Sugiyama: Japan: Determination of Cigarette Mainstream Smoke TSNAs
- Oral Dis - Fu: China: Role of cigarette filter on the risk of oral cancer: case-control population study
- Pediatr Pulmonol - Ralston: US: RT: Brief intervention to promote parent cessation during child hospitalization
- Pub Health - Braillon: FCTC: The Framework Convention on Tobacco Control's original sin
- Pub Health Nutr - Schneider: Germany: Neighbourhood deprivation & tobacco, alcohol & fast food outlet density
- SATPP - Strine: US: Sex-specific psychological distress in childhood & current adult smoking

## Abstracts:

## Editorial

### Priorities for tobacco control research in India

#### Addiction

[Early View \(Online Version of Record published before inclusion in an issue\)](#)

Article first published online: **12 JUL 2012**

Bidyut K. Sarkar and K. Srinath Reddy

#### Summary

The enormity of the tobacco epidemic in India, which has a population greater than the United States and Europe combined, merits a huge scaling-up of research efforts that can inform, support and evaluate tobacco control. Research is needed to underpin all the World Health Organization's MPOWER recommendations. Prioritization and coordination of the research efforts are critical to success and ensuring value for money. Apart from the sheer size of the country and its population, its cultural and regional diversity present particular challenges.

India is the second most populous country in the world, with more than 1.2 billion inhabitants: more than Europe and the United States combined. According to the Global Adult Tobacco Survey (GATS), there are 275 million tobacco users in India, 35% of all adults. This figure is made up of 164 million smokeless tobacco users, 69 million smokers and 42 million people using both smoked and smokeless forms of tobacco [1]. The damage to health arising from this tobacco usage is vast, and presents one of the major public health challenges facing the country. The World Health Organization (WHO) had commenced its international negotiations on the Framework Convention for Tobacco Control in year 2000. Unfortunately, the Millennium Development Goals declared by United Nations in 2000 did not include tobacco control [2], despite clear evidence of a tobacco pandemic [3]; but evidence is available that it is in the low- and middle-income countries (LMIC) that the greatest toll of premature death and disease lies. With the case for tobacco control becoming stronger over the past decade [4], the United Nations (UN) called recently for a global effort to combat tobacco at the high-level meeting on Non-Communicable Diseases, the United Nations General Assembly Special Session (UNGASS) in September 2011 [5]. Now is a good time to take stock of what research is needed most urgently to support tobacco control in India...

The challenge involved in undertaking nationally relevant research on tobacco in India is immense, but the importance of so doing is commensurate with this. When one considers the research effort that goes into informing tobacco control policy in countries such as the United States with 270 million inhabitants, the United Kingdom with 60 million and Australia with 20 million, a huge scaling-up of research in India would seem entirely appropriate. The Government of India would need to designate specific funds and pooled resources from the international research community would be required to take this research forward for addressing this major public health issue. Increased and uniform taxation of all tobacco products in India could potentially generate adequate revenue for tobacco control interventions overall, including research. Further, India can raise more funds through a mandatory annual registration and testing levy for each marketed brand on tobacco manufacturing companies, as was conducted by Brazil's National Health Surveillance Agency (ANVISA) in 2001 [20]. Such research will pay dividends for the economy of the country as well as the health and wellbeing of its

inhabitants. National coordination of the research effort will be essential to determining priorities and maximizing value for money.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03942.x/abstract>

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03942.x/pdf>

**Note:** Open Access. Full text PDF freely available from link immediately above.

**Also:**

Commentary on Peters et al. (2012): Cannabis and tobacco policy correlates - why not try to reduce harm?

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03915.x/full>

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03915.x/pdf>

**Note:** Open Access. Commentary PDF freely available from link immediately above. Original report, referenced below and previously highlighted, but now in final format, not Open Access.

**Referenced *Addiction* study:**

Clinical Correlates of Co-Occurring Cannabis and Tobacco Use: A Systematic Review

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03843.x/abstract>

**Efficacy and safety of pharmacotherapy for smoking cessation among pregnant smokers: a meta-analysis**

***BJOG*. 2012 Aug;119(9):1029-1039. doi: 10.1111/j.1471-0528.2012.03408.x.**

[Myung SK, Ju W, Jung HS, Park CH, Oh SW, Seo H, Kim H; for the Korean Meta-Analysis \(KORMA\) Study Group.](#)

**Abstract**

**Background** The efficacy and safety of pharmacotherapy for smoking cessation among pregnant smokers has not yet been established. **Objective** To investigate the efficacy and safety of pharmacotherapy for smoking cessation among pregnant smokers. **Search strategy** A search was made of PubMed, Embase and CENTRAL in June 2011. **Selection criteria** Randomised controlled trials (RCTs), quasi-RCTs and retrospective or prospective controlled studies were included. **Data collection and analysis** The main analyses were designed to examine the efficacy of pharmacotherapy for smoking cessation among pregnant smokers based on the longest follow-up data available and from data obtained at the latest available time-point in pregnancy in each study. **Main results** Of 74 articles identified from the databases, seven studies (five RCTs, one quasi-RCT and one prospective study) involving a total of 1386 pregnant smokers, 732 in the intervention groups and 654 in the control groups, were included in the final analyses. In a fixed-effects meta-analysis of all seven studies based on the longest follow-up data available, pharmacotherapy had a significant effect on smoking cessation (relative risk [RR] 1.80; 95% confidence interval [CI] 1.32-2.44). Subgroup meta-analysis by type of study design also showed similar findings for RCTs (RR 1.48; 95% CI 1.04-2.09) and other types of studies (RR 3.25; 95% CI 1.65-6.39). The abstinence rate at late pregnancy in the intervention ranged from 7 to 22.6% (mean abstinence rate 13.0%; 95% CI 10.9-15.2%). A few minor adverse effects and serious adverse effects were reported in several studies. **Author's conclusions** This study indicates that there may be clinical evidence to support the use of pharmacotherapy for smoking cessation among pregnant smokers. Further RCTs are needed.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1471-0528.2012.03408.x/abstract>

**Pesticide Residues in Tobacco Leaves from the Kushtia District in Bangladesh**

***Bull Environ Contam Toxicol*. 2012 Jul 11. [Epub ahead of print]**

[Rahman MA, Chowdhury AZ, Moniruzzaman M, Gan SH, Islam MN, Fardous Z, Alam MK.](#)

**Abstract**

In this study, tobacco leaf samples (n = 26) were collected from different areas in Kushtia to determine the presence of residues of cypermethrin, diazinon, heptachlor, methoxychlor dichlorodiphenyltrichloroethane (DDT), dichlorodiphenyldichloroethane (DDD) and dichlorodiphenyldichloroethylene (DDE). The analysis was conducted by a High Performance Liquid Chromatography (HPLC) system that was equipped with a photodiode array detector. Both cypermethrin and diazinon were detected in tobacco samples from six districts, namely, Mirzapur, Shahebnagar,

Kodalipara, Pragpur, Farakpur and Taragunia. The highest concentration of cypermethrin was found in Kodalipara (2.00 ppm) while the highest concentration of diazinon was detected in a sample from Pragpur (0.15 ppm). The pesticide DDT was only detected in the sample from Pragpur at 4.00 ppm. This is the first study in Bangladesh that reports pesticide residue concentrations in tobacco leaf samples.

<http://www.springerlink.com/content/t5m28vv123077177/?MUD=MP>

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## Enhancing partner support to improve smoking cessation

[Cochrane Database Syst Rev.](#) 2012 Jul 11;7:CD002928.

[Park EW](#), [Tudiver FG](#), [Campbell T](#).

### Abstract

#### BACKGROUND:

While many cessation programmes are available to assist smokers in quitting, research suggests that partner involvement may encourage long-term abstinence.

#### OBJECTIVES:

The purpose of this review was to determine if an intervention to enhance partner support helps smoking cessation when added as an adjunct to a smoking cessation programme, and to estimate the size of any effect.

#### SEARCH METHODS:

For the most recent update, the search was limited to the Cochrane Tobacco Addiction Group Specialized Register. This was searched in December 2011. The Specialized Register includes reports of controlled trials of smoking cessation identified from electronic searches of the Cochrane Central Register of Controlled Trials (CENTRAL) to Issue 4, 2011, MEDLINE to update 20110826, EMBASE to 2011 week 33, PsycINFO to 20110822 and Web of Science. The search terms used were smoking (prevention, control, therapy), smoking cessation, and support (family, marriage, spouse, partner, sexual partner, buddy, friend, co-habitees and co-worker).

#### SELECTION CRITERIA:

Randomized controlled trials of smoking cessation interventions that compared an intervention that included a partner support component with an otherwise identical intervention and reported follow-up of six months or longer.

#### DATA COLLECTION AND ANALYSIS:

Two authors independently identified the included studies and extracted data using a structured form. A third author was consulted to aid in the resolution of discrepancies. Abstinence, biochemically validated if possible, was the primary outcome measure and was extracted at two post-treatment intervals: six to nine months and 12 months or greater. Partner Interaction Questionnaire and Support Provided Measure scores were also analysed to assess partner support. A fixed-effect model was used to pool relative risks from each study and estimate a summary effect.

#### MAIN RESULTS:

A total of 57 articles were identified for this review. Twelve articles (13 studies, > 2000 participants) met the inclusion criteria. The definition of partner varied between studies. All studies gave self-reported smoking cessation rates, but there was limited biochemical validation of abstinence. The pooled risk ratio for self-reported abstinence was 0.99 (95% confidence interval (CI) 0.84 to 1.15) at six to nine months and 1.04 (95% CI 0.87 to 1.24) at 12 months or more post-treatment. Of the eight studies that measured partner support at follow-up, only two studies reported a significant increase in partner support in the intervention groups. One study reported a significant increase in partner support in the intervention group, but smokers' reports of partner support received did not differ significantly in this study.

#### AUTHORS' CONCLUSIONS:

In this review of randomized controlled trials of interventions designed to enhance partner support for smokers in cessation

programmes, we failed to detect an increase in quit rates. Limited data from several of the trials suggest that these interventions also did not increase partner support. No conclusions can be made about the impact of partner support on smoking cessation. Additional studies with larger samples are needed to adequately explore the effects of partner support interventions for smoking cessation.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD002928.pub3/abstract>

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## **Smoking motives of daily and non-daily smokers: A profile analysis**

**[Drug Alcohol Depend.](#) 2012 Jul 9. [Epub ahead of print]**

[Shiffman S](#), [Dunbar MS](#), [Scholl SM](#), [Tindle HA](#).

### **Abstract**

#### **BACKGROUND:**

Non-daily or intermittent smoking is becoming common, but little is known about smoking patterns of intermittent smokers (ITS). This study assesses differences in the profile of smoking motives of non-daily, ITS and daily smokers (DS).

#### **METHODS:**

Participants were 218 DS and 252 ITS (152 converted ITS [CITS], who previously smoked daily, and 80 native ITS [NITS] who did not), not currently quitting, recruited by advertisement. ITS were defined as smoking 4-27 days per month; DS as smoking daily, 5-30 cigarettes per day. Participants completed the Wisconsin Inventory of Smoking Dependence Motives (WISDM), yielding scores for 13 different motives. The within-profile standard deviation expressed profile scatter (differentiation among motives), and profile shape was assessed on scores standardized for within-profile mean and standard deviation.

#### **RESULTS:**

There was no difference between ITS and DS on profile scatter. ITS and DS differed in the shape of the standardized score profile, with DS scoring higher on Tolerance, Craving, Automaticity, Loss of Control and Behavioral Choice motives, and ITS scoring higher on Cue Exposure, Weight Control, and Positive Reinforcement motives. CITS did not differ from NITS in profile scatter or profile shape.

#### **CONCLUSION:**

ITS differ from DS in the relative importance of motives, with ITS emphasizing motives associated with acute, situational smoking, and DS emphasizing dependence-related motives. Among ITS, history of daily smoking did not influence the profile of motives.

<http://www.sciencedirect.com/science/article/pii/S037687161200213X>

#### **Also:**

Assessing the association between the use of NRT for smoking reduction and attempts to quit smoking using propensity score matching

<http://www.sciencedirect.com/science/article/pii/S0376871612002153>

Cognitive behavioral smoking cessation during alcohol detoxification treatment: A randomized, controlled trial

<http://www.sciencedirect.com/science/article/pii/S0376871612001895>

Alcohol and tobacco use and heart rate reactivity to a psychosocial stressor in an adolescent population

<http://www.sciencedirect.com/science/article/pii/S0376871612001949>

Accentuating effects of nicotine on ethanol response in mice with high genetic predisposition to ethanol-induced locomotor stimulation

<http://www.sciencedirect.com/science/article/pii/S0376871612002475>

**Bladder cancer, a review of the environmental risk factors**

[Environ Health](#). 2012 Jun 28;11 Suppl 1:S11.

[Letašiová S](#), [Medvedřová A](#), [Sovčřiková A](#), [Dušřinská M](#), [Volkovová K](#), [Mosoiu C](#), [Bartonová A](#).

**Abstract****BACKGROUND:**

Many epidemiological studies and reviews have been performed to identify the causes of bladder cancer. The aim of this review is to investigate the links between various environmental risk factors and cancer of the bladder.

**METHODS:**

A systematic literature search was performed using PubMed, Science Direct, Scopus, Scholar Google and Russian Google databases to identify reviews and epidemiological studies on bladder cancer risk factors associated with the environment published between 1998 and 2010. Only literature discussing human studies was considered.

**RESULTS:**

Smoking, mainly cigarette smoking, is a well known risk factor for various diseases, including bladder cancer. Another factor strongly associated with bladder cancer is exposure to arsenic in drinking water at concentrations higher than 300 µg/l. The most notable risk factor for development of bladder cancer is occupational exposure to aromatic amines (2-naphthylamine, 4-aminobiphenyl and benzidine) and 4,4'-methylenebis(2-chloroaniline), which can be found in the products of the chemical, dye and rubber industries as well as in hair dyes, paints, fungicides, cigarette smoke, plastics, metals and motor vehicle exhaust. There are also data suggesting an effect from other types of smoking besides cigarettes (cigar, pipe, Egyptian waterpipe, smokeless tobacco and environmental tobacco smoking), and other sources of arsenic exposure such as air, food, occupational hazards, and tobacco. Other studies show that hairdressers and barbers with occupational exposure to hair dyes experience enhanced risk of bladder cancer. For example, a study related to personal use of hair dyes demonstrates an elevated bladder cancer risk for people who used permanent hair dyes at least once a month, for one year or longer.

**CONCLUSION:**

Smoking, in particular from cigarettes, exposure to arsenic in drinking water, and occupational exposure to aromatic amines and 4,4'-methylenebis(2-chloroaniline) are well known risk factors for various diseases including bladder cancer. Although the number of chemicals related to occupational exposure is still growing, it is worth noting that it may take several years or decades between exposure and the subsequent cancer.

<http://www.ehjournal.net/content/11/S1/S11>

<http://www.ehjournal.net/content/pdf/1476-069X-11-S1-S11.pdf>

**Note:** Open Access. Full text PDF freely available from link immediately above.

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**Changes in adolescents mental health and use of alcohol and tobacco: a 10-year time-trend study of Finnish adolescents**

[Eur Child Adolesc Psychiatry](#). 2012 Jul 11. [Epub ahead of print]

[Sourander A](#), [Koskelainen M](#), [Niemelä S](#), [Rihko M](#), [Ristkari T](#), [Lindroos J](#).

**Abstract**

The present study examines the 10-year time-trend changes of adolescent psychiatric symptoms, smoking and alcohol use. Representative population-based samples with same methods at two time-points, same age range and with 10-year period between the time points were gathered in Finland to investigate secular changes in adolescents' emotional and behavioral problems. Seventh and ninth grade students filled in the Strengths and Difficulties Questionnaire (SDQ) and questions regarding alcohol use and smoking anonymously during a school lesson in 1998 (n = 1458) and 2008 (n = 1569). The self-reports of SDQ showed substantial stability in emotional and behavioral problems from 1998 to 2008.

There was no increase between the two timepoints in self-reports of SDQ total, conduct, hyperactivity, emotional or peer problems when using the 90th percentile clinical cut-off points. However, there was a trend showing decreasing prosocial behavior among girls indicating that proportions of adolescent boys and girls having problems in prosocial behavior have converged. The self-reported alcohol use, drunkenness and cigarette smoking decreased within the 10-year time period. Of alcohol use, the number of non-users increased from 44 to 63 % between the years 1998 and 2008. Similarly, the proportion of non-smokers increased from 56 to 68 %. Although rates of substance use declined within the 10-year study period, drunkenness-oriented alcohol use and regular smoking are still prevalent among Finnish adolescents.

<http://www.springerlink.com/content/x5r27648057q3663/>

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### **Accommodating diverse clients' needs in evaluation capacity building: A case study of the Tobacco Control Evaluation Center**

**[Eval Program Plann.](#) 2012 Jun 26;36(1):49-55. [Epub ahead of print]**

[Satterlund TD](#), [Treiber J](#), [Kipke R](#), [Kwon N](#), [Cassady D](#).

#### **Abstract**

In this case study, we detail and analyze how the Tobacco Control Evaluation Center (TCEC), an evaluation technical assistance center that serves approximately 100 local tobacco control organizations in California, endeavors to build capacity among the state-funded local providers it serves by using evaluation capacity building activities with an utilization-focused evaluation framework. We call this a "blended approach" and describe these methods. Satisfaction and demand for TCEC services are documented to provide measurements for evaluation capacity building. Final evaluation report scores from two intervention cycles (2004-2007 and 2007-2010) submitted to the California Health Department, Tobacco Control Division are also assessed and compared. These measures demonstrate an increase in evaluation capacity by local projects under TCEC's purview.

<http://www.sciencedirect.com/science/article/pii/S0149718912000596>

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### **Young adult perceptions of smoking in outdoor park areas**

**[Health Place.](#) 2012 Jun 19. [Epub ahead of print]**

[Klein EG](#), [Bernat DH](#), [Forster JL](#).

#### **Abstract**

##### **PURPOSE:**

Smoking restrictions in recreational settings are established to promote anti-smoking norms and reduce exposure to secondhand smoke. Outdoor smoke-free policies are increasing, yet little is known about the perceptions of such restrictions.

##### **METHODS:**

Data were collected from a population-based sample of young adults (n=2289) in upper Midwestern United States. Cross-sectional multivariate logistic regression was used to assess predictors of the perceived difficulty to smoke in outdoor park areas.

##### **RESULTS:**

Living in an area with a smoke-free park policy was associated with a 1.4 times higher odds of perceiving difficulty to smoke compared to those living in an area without such a policy, after controlling for past month smoking, physical activity, age, and gender. Both smokers and non-smokers living in an area with a smoke-free park policy had higher odds of perceiving difficulty to smoking in park areas (OR=1.6 and 1.3 respectively) compared to smokers and non-smokers living in areas without such policies.

##### **CONCLUSION:**

Banning smoking in park areas was associated with a heightened perception of difficulty in smoking for young adult smokers and non-smokers.

<http://www.sciencedirect.com/science/article/pii/S1353829212001098>

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## The Effect of Cigarette Branding and Plain Packaging on Female Youth in the United Kingdom

### [Journal of Adolescent Health](#)

Available online 7 July 2012

[David Hammond](#), [Samantha Daniel](#), [Christine M. White](#)

#### Abstract

#### Purpose

Cigarette packaging is the most prominent form of tobacco marketing remaining in countries such as the United Kingdom. The current study examined perceptions of cigarette packaging among female youth and the potential impact of “plain” cigarette packaging regulations.

#### Methods

A national sample of 947 16- to 19-year-old female subjects in the United Kingdom completed an online survey. Participants were randomized to view 10 cigarette packs designed according to one of four experimental conditions: fully branded female packs, the same packs without descriptor words, the same packs without brand imagery or descriptors (“plain” packs), and branded non-female brands. Participants rated packs on measures of appeal and health risk, positive smoker image, and completed a behavioral pack selection task.

#### Results

Plain packs were rated as the least appealing and worse tasting compared with all other conditions. Plain packs were also associated with fewer false beliefs about health risks compared with branded packs. Removing brand descriptors from packs significantly reduced measures of appeal and taste, particularly for brands with flavor descriptors, such as cherry and vanilla. Plain packs were significantly less likely to be associated with positive images, such as glamour, sophistication, and slimness. Most importantly, respondents were significantly less likely to accept a pack of cigarettes when offered only plain versus branded packs ( $p = .026$ ).

#### Conclusions

Marketing in the form of pack branding remains a potent tool for increasing the appeal of tobacco products to young women. The findings provide empirical support for plain cigarette packaging regulations in Australia to be implemented in 2012.

<http://www.jahonline.org/article/S1054-139X%2812%2900222-4/abstract>

<http://www.sciencedirect.com/science/article/pii/S1054139X12002224>

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## Smoker identity and smoking escalation among adolescents

[Health Psychol.](#) 2012 Jul;31(4):467-75.

[Hertel AW](#), [Mermelstein RJ](#).

#### Abstract

Objective: We investigated whether there is a positive, unique relation between smoker identity and smoking escalation. Methods: Adolescents from the Chicago area ( $n = 1263$ ) completed paper-and-pencil questionnaires and in-person interviews at baseline, 6 months, 15 months, and 24 months of a longitudinal study. Smoking behavior, smoker identity, nicotine dependence, smoking expectancies, smoking motives, and novelty seeking were assessed. Results: There was a unique relation between smoker identity and smoking escalation. The more that adolescents thought smoking was a defining aspect of who they were, the more likely their smoking escalated. Conclusions: The findings suggest that smoker identity could be targeted for preventing escalation. Research on its development is needed.



<http://psycnet.apa.org/journals/hea/31/4/467/>

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## Smoking and abdominal fat in blood donors

**J Bras Pneumol.** 2012 Jun;38(3):356-363.

[Article in English, Portuguese]

[Faria CD](#), [Botelho C](#), [Silva RM](#), [Ferreira MG](#).

### Abstract

#### OBJECTIVE:

To assess the association between smoking and abdominal fat among male blood donors.

#### METHODS:

This was a cross-sectional study involving 1,235 adult male blood donors (age, 20-59 years) in the city of Cuiabá, Brazil. Socioeconomic, demographic, and anthropometric data, as well as information on the lifestyle of the participants, were collected. In this study, waist circumference and waist-to-hip ratio were used as markers of abdominal fat. The association between these two markers and smoking was analyzed by multiple linear regression in separate models, adjusted for potential confounders.

#### RESULTS:

Of the 1,235 respondents, 273 (22.1%) reported being smokers, and, of those, 99 (36.3%) reported smoking more than 15 cigarettes per day. The average body mass index was lower among smokers than among nonsmokers ( $p < 0.001$ ). In the multiple linear regression analyses, smoking was associated with waist circumference and waist-to-hip ratio for smokers of 6-10 cigarettes/day and of  $> 11$  cigarettes/day.

#### CONCLUSIONS:

In our sample, smoking was positively associated with indicators of abdominal fat, regardless of potential confounding factors, including the consumption of alcoholic beverages.

[http://www.scielo.br/scielo.php?script=sci\\_arttext&pid=S1806-37132012000300011&lng=en&nrm=iso&tlng=en](http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1806-37132012000300011&lng=en&nrm=iso&tlng=en)

[http://www.scielo.br/pdf/jbpneu/v38n3/en\\_v38n3a11.pdf](http://www.scielo.br/pdf/jbpneu/v38n3/en_v38n3a11.pdf)

Tabagismo e obesidade abdominal em doadores de sangue

[http://www.scielo.br/scielo.php?script=sci\\_arttext&pid=S1806-37132012000300011&lng=en&nrm=iso&tlng=pt&ORIGINALLANG=pt](http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1806-37132012000300011&lng=en&nrm=iso&tlng=pt&ORIGINALLANG=pt)

<http://www.scielo.br/pdf/jbpneu/v38n3/v38n3a11.pdf>

**Note:** Open Access. Full text PDF freely available in English or Portuguese from links immediately above.

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## Smoking in early and mid-adolescence

**J Dev Behav Pediatr.** 2012 Jul;33(6):449-55.

[Forza G](#), [Buja A](#), [Tognazzo F](#), [Vinelli A](#), [Baldo V](#), [Amadori A](#).

### Abstract

Objective: Smoking among young people is declining in many European countries, although in some (particularly Central and Eastern Europe), the rates among young females are increasing. We compared the risk factors and variables for smoking in early- versus mid-adolescence with a view to helping policy makers identify age-specific prevention strategies. Methods: An anonymous questionnaire on smoking habits was administered to 1383 underage students in the Veneto

Region (northeast Italy) in 2010, consisting of multiple-choice questions using words, numbers, and graphical illustrations designed to make it appeal to the adolescent age group. Results: Among 611 sixth-grade students, 93.5% of the boys and 95.3% of the girls had never smoked, although this was true of 53.2% of the boys and only 38.8% of the girls among 772 ninth-grade students. The first cigarette was smoked in different social settings and places, depending on the adolescents' age group. Age also influenced how much adolescents approved of smoking and their perception of how much their parents approved of them smoking. Adherence to the rules of their group of friends was the only variable found associated with smoking in both the age groups considered. Conclusion: We found experimental or habitual cigarette smoking rare among sixth graders, but much more common among ninth graders. Focused preventive measures are therefore needed in the intervening years. The transition from middle school to higher education coincides with a sharp drop in the perceived regulation of smoking at school, emphasizing the need for action to establish high schools as smoke-free environments.

[http://journals.lww.com/jmlidb/Abstract/2012/07000/Smoking\\_in\\_Early\\_and\\_Mid\\_Adolescence.1.aspx](http://journals.lww.com/jmlidb/Abstract/2012/07000/Smoking_in_Early_and_Mid_Adolescence.1.aspx)

## The Role of Cancer Research in Noncommunicable Disease Control

[J Natl Cancer Inst.](#) 2012 Jul 10. [Epub ahead of print]

[Wild CP.](#)

### Abstract

Noncommunicable diseases were estimated to claim more than 36 million lives worldwide in 2008. Major contributors to this burden were cardiovascular disease, cancer, chronic respiratory diseases, and diabetes. The United Nations General Assembly held a high-level meeting on noncommunicable diseases in September 2011 for heads of states and governments, conscious of the projected increases in disease incidence, particularly in low- and middle-income countries. This meeting followed the Special Session on HIV/AIDS in 2001, the only other high-level meeting to discuss a health topic and orient the global political agenda toward a growing threat to human development. Proposed strategies for control of noncommunicable diseases focused mainly on the shared risk factors of tobacco, harmful use of alcohol, physical inactivity, and unhealthy diet. However, for cancer, a broader response is required. Notably, the heterogeneity of cancer with respect to its geographical distribution, etiology, and pathology all demand a more nuanced, regional, or even local approach. Preparations for the meeting elicited enormous attention from governments and nongovernmental organizations, but the engagement of the research community was less evident. This commentary calls for the involvement of the cancer research community in response to the further action detailed in the United Nations Political Declaration emanating from the meeting, identifies a number of cancer-specific priorities, including vaccination against hepatitis B virus and human papillomavirus, cervical cancer screening, and early detection of breast cancer, and suggests areas where cancer research can provide the evidence base for cancer control, notably in improving the quality and coverage of cancer registration, elucidating cancer etiology, and evaluating interventions, including their implementation in low-resource health-care settings. Finally, the need for global cooperation in developing a research agenda for low- and middle-income countries is highlighted.

...The key achievement regarding tobacco was the Framework Convention for Tobacco Control in 2005, the first international treaty on health. The priorities for control of noncommunicable diseases were proposed based on this background... Crucially, however, the magnitude of the effect of the above-mentioned risk factors on cancer control by region will depend on their prevalence and the direction of their time trends. In some cases, the goal will be to reduce prevalent exposures, whereas in other cases it will be to prevent the introduction of a risk factor; in the latter case, the action taken will preempt projected increases in disease burden rather than tackling the existing burden. For example, tobacco control through implementation of the Framework Convention for Tobacco Control is universally beneficial for controlling cardiovascular diseases and cancer, either by reducing tobacco use in countries where it is already common or by restricting its introduction where its use is currently uncommon...

<http://jnci.oxfordjournals.org/content/early/2012/07/10/jnci.djs262.long>

<http://jnci.oxfordjournals.org/content/early/2012/07/10/jnci.djs262.full.pdf+html>

**Note:** Open Access. Full text PDF freely available from link immediately above.

**Development of The American Association for Thoracic Surgery guidelines for low-dose computed tomography scans to screen for lung cancer in North America: Recommendations of The American Association for Thoracic Surgery Task Force for Lung Cancer Screening and Surveillance**

[J Thorac Cardiovasc Surg. 2012 Jul;144\(1\):25-32.](#)

[Jacobson FL](#), [Austin JH](#), [Field JK](#), [Jett JR](#), [Keshavjee S](#), [Macmahon H](#), [Mulshine JL](#), [Munden RF](#), [Salgia R](#), [Strauss GM](#), [Sugarbaker DJ](#), [Swanson SJ](#), [Travis WD](#), [Jaklitsch MT](#).

## Abstract

### OBJECTIVE:

The study objective was to establish The American Association for Thoracic Surgery (AATS) lung cancer screening guidelines for clinical practice.

### METHODS:

The AATS established the Lung Cancer Screening and Surveillance Task Force with multidisciplinary representation including 4 thoracic surgeons, 4 thoracic radiologists, 4 medical oncologists, 1 pulmonologist, 1 pathologist, and 1 epidemiologist. Members have engaged in interdisciplinary collaborations regarding lung cancer screening and clinical care of patients with, and at risk for, lung cancer. The task force reviewed the literature, including screening trials in the United States and Europe, and discussed local best clinical practices in the United States and Canada on 4 conference calls. A reference library supported the discussions and increased individual study across disciplines. The task force met to review the literature, state of clinical practice, and recommend consensus-based guidelines.

### RESULTS:

Nine of 14 task force members were present at the meeting, and 3 participated by telephone. Two absent task force members were polled afterward. Six unanimous recommendations and supporting work-up algorithms were presented to the Council of the AATS at the 2012 annual meeting in San Francisco, California.

### CONCLUSIONS:

Annual lung cancer screening and surveillance with low-dose computed tomography is recommended for smokers and former smokers with a 30 pack-year history of smoking and long-term lung cancer survivors aged 55 to 79 years. Screening may begin at age 50 years with a 20 pack-year history of smoking and additional comorbidity that produces a cumulative risk of developing lung cancer of 5% or greater over the following 5 years. Screening should be undertaken with a subspecialty qualified interdisciplinary team. Patient risk calculator application and intersociety engagement will provide data needed to refine future lung cancer screening guidelines.

<http://www.jtcvsonline.org/article/S0022-5223%2812%2900599-5/abstract>

<http://www.sciencedirect.com/science/article/pii/S0022522312005995>

### Referenced JAMA review:

Benefits and Harms of CT Screening for Lung Cancer: A Systematic Review

<http://jama.jamanetwork.com/article.aspx?articleid=1163892>

### Related coverage:

Heavy smokers should get annual CT screening, thoracic surgeons say

<http://www.ama-assn.org/amednews/2012/07/09/hlsc0711.htm>

## Impact of smoking status on outcome in patients with ST-segment elevation myocardial infarction treated with primary percutaneous coronary intervention

[J Thromb Thrombolysis. 2012 Jul 7. \[Epub ahead of print\]](#)

[Rakowski T](#), [Siudak Z](#), [Dziewierz A](#), [Dubiel JS](#), [Dudek D](#).

## Abstract

There are some data showing lower mortality of smokers comparing to non-smokers in patients with ST-segment elevation myocardial infarction (STEMI) when treated with thrombolysis or without reperfusion therapy. However, the role of

smoking status is less established in patients with STEMI undergoing mechanical reperfusion. We evaluate the influence of smoking on outcome in patients with STEMI treated with primary percutaneous coronary intervention (PCI). A total of 1,086 patients enrolled into EUROTRANSFER Registry were included into present analysis. Patients were divided according to smoking status during STEMI presentation into those who were current smokers (391 patients, 36 %) and non-smokers (695 patients, 64 %). Current smokers were younger and more often men and less frequently had high-risk features as previous myocardial infarction, history of chronic renal failure, previous PCI, diabetes mellitus, anterior wall STEMI, and multivessel disease. Unadjusted mortality at 1 year was lower in current smokers comparing to non-smokers (3.3 vs. 9.5 %; OR 0.33 CI 0.18-0.6;  $p = 0.0001$ ). However, after adjustment for age and gender by logistic regression, there was no longer significant difference between groups (OR 0.7; CI 0.37-1.36;  $p = 0.30$ ). In conclusion, current smokers with STEMI treated with primary PCI have lower mortality at 1 year comparing to non-smokers, but this result may be explained by differences in baseline characteristics and not by smoking status itself. Current smokers developed STEMI more than 10 years earlier than non-smokers with similar age and sex-adjusted risk of death at 1 year. These results emphasize the role of efforts to encourage smoking cessation as prevention of myocardial infarction.

<http://www.springerlink.com/content/e55312349n206016/>

<http://www.springerlink.com/content/e55312349n206016/fulltext.pdf>

**Note:** Open Access. Full text PDF freely available from link immediately above.

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## Effect of Smoking and Gender on Pulmonary Function and Clinical Features in Sarcoidosis

[Lung](#). 2012 Jul 8. [Epub ahead of print]

[Krell W](#), [Bourbonnais JM](#), [Kapoor R](#), [Samavati L](#).

### Abstract

#### BACKGROUND:

The effect of cigarette smoking on the clinical manifestations and progression of sarcoidosis is not well characterized. We sought to determine the effects of smoking in sarcoidosis patients and to evaluate for gender-specific differences.

#### METHODS:

We examined the effects of cigarette smoking in 518 patients seen at the Sarcoidosis and Interstitial Lung Disease Center at Wayne State University using radiographic pattern, pulmonary function testing, and clinical features of the disease. We performed a separate analysis to evaluate for gender-specific differences based on smoking history.

#### RESULTS:

We found that smokers had significantly lower FEV(1) and FEV(1)/FVC values. Total lung capacity was not significantly different between smokers and nonsmokers, but diffusion capacity for carbon monoxide (DL(CO)) was significantly reduced in smokers. Gender-based statistical analysis showed a marked decrease in DL(CO) values among female smokers. Smokers were also found to have a higher incidence of extrapulmonary involvement as multivariate regression analysis demonstrated that both smoking and female gender are significantly associated with the development of extrapulmonary manifestations.

#### CONCLUSIONS:

Our data indicate that both cigarette smoking and gender are important in shaping the clinical manifestations of sarcoidosis. The nature of the gender difference requires further study and may be related to differences in inflammatory response.

<http://www.springerlink.com/content/u765352q5081m7n3/>

#### Also:

Risk of Chronic Bronchitis in Twin Pairs Discordant for Smoking

<http://www.springerlink.com/content/d4q8778462t61034/>

## The Association Between Neurocognitive Functioning and Smoking in Adolescence: The TRAILS Study

[Neuropsychology](#). 2012 Jul 9. [Epub ahead of print]

[Harakeh Z](#), [de Sonnevile L](#), [van den Eijnden RJ](#), [Huizink AC](#), [Reijneveld SA](#), [Ormel J](#), [Verhulst FC](#), [Monshouwer K](#), [Vollbregh WA](#).

### Abstract

**Objective:** This study examines the association between neurocognitive functioning and tobacco smoking in adolescence. **Method:** Data from three measurements of the longitudinal Tracking Adolescents' Individual Lives Survey (TRAILS), a large regional population-based cohort study of Dutch adolescents, were used. The first measurement took place in 2001-2002 (T1) when participants were age 11, with two follow-up measurements (2003-2004 and 2005-2007; T2 and T3, respectively). A total of 1,797 adolescents participated in all three waves. At T1, they performed a selection of tasks from the Amsterdam Neuropsychological Tasks program (De Sonnevile, 1999), which enabled the assessment of the main aspects of neurocognitive functioning. Smoking was assessed with a self-report questionnaire at T1, T2, and T3. In the multivariate analyses we controlled for gender, age, socioeconomic status (SES) and baseline speed. **Results:** Multivariate logistic regression analyses showed that poor sustained attention increased the likelihood that the adolescent would initiate smoking between T1 and T2. Low inhibition of prepotent responses increased the likelihood of smoking initiation between T1 and T3. An increased ability to inhibit biased response tendencies reduced the likelihood of being a daily smoker at T2. Poor sustained attention increased the likelihood of being a daily smoker at T3. **Conclusion:** Poor sustained attention and low inhibition predicted adolescent smoking. However, the proportion of the variance in smoking risk accounted for by these neurocognitive predictors proved to be small. Thus, although neurocognitive functioning is related to adolescent smoking, it seems to explain only a small part of why adolescents initiate and continue smoking.

<http://psycnet.apa.org/psycinfo/2012-17655-001/>

## Variable influence of the degree of smoking dependence on adult attention deficit/hyperactivity disorder in Iraqi medical students

[Neurosciences \(Riyadh\)](#). 2012 Jul;17(3):241-7.

[Ashor AW](#).

### Abstract

#### OBJECTIVE:

To demonstrate the differences in the patterns of adult attention deficit/hyperactivity disorder (ADHD) symptoms among non, light, and heavy smokers.

#### METHODS:

A cross-sectional study involving 400 medical students (representing first to sixth year students) was conducted in the Department of Pharmacology, University of Al-Mustansiriya, Baghdad, Iraq from March to June 2011. The medical students completed a questionnaire containing the adult ADHD self-report scale (ASRS-screener) and the Fagerstrom Test for Nicotine Dependence (FTND). An ADHD score  $\geq 14$  was considered positive. An FTND score  $\geq 6$  signifies heavy smokers, and an FTND score  $\leq 5$  signifies light smokers.

#### RESULTS:

Three hundred and sixty-one medical students completed the questionnaire, 16.6% reported ADHD symptoms (19.8% male, 12.1% females). Forty-five percent of ADHD adults were smokers; more than half of them were categorized as heavy smokers (51.8%). In comparison with non-smokers, heavy smokers displayed significant deterioration in their inattentive and total ASRS score ( $p=0.0001$ ). Light smokers show significantly higher hyperactive symptoms in comparison with non-smokers ( $p=0.041$ ). A high FTND score was associated with severer deterioration in inattentive ( $r=0.391$ ,  $p=0.001$ ) but not hyperactive symptoms ( $r=0.153$ ,  $p=0.117$ ).

#### CONCLUSION:

The ADHD symptoms are highly prevalent among Iraqi medical students, and smoking among ADHD students is higher

and heavier than non-ADHD controls. Heavy smoking tends to deteriorate rather than ameliorate (self-medicate) ADHD symptoms.

<http://www.neurosciencesjournal.org/cgi-bin/ContentList.asp?ContentRef=3#1722>

<http://www.neurosciencesjournal.org/PDFFiles/Jul12/Variable20110744.pdf>

**Note:** Open Access. Full text PDF freely available from link immediately above.

## Determination of Tobacco-Specific N'-Nitrosamines in Mainstream Smoke from Japanese Cigarettes

[Nihon Eiseigaku Zasshi](#). 2012 May;67(3):423-30.

[Sugiyama K](#), [Inaba Y](#), [Ohkubo T](#), [Uchiyama S](#), [Takagi Y](#), [Kunugita N](#).

### Abstract

**Objectives:** Mainstream smoke from cigarettes contains tobacco-specific N'-nitrosamines (TSNAs) listed as Group 1 and 3 carcinogens by the International Agency for Research on Cancer (IARC). Herein, we report on a method of measuring the concentrations of TSNAs in mainstream smoke from the ten top-selling Japanese cigarette brands using an ISO regime by International Organization for Standardization (ISO) and HCl regime of Health Canada. **Methods:** Tar in mainstream smoke was collected on a Cambridge filter pad using a smoking machine. The filter pad was immersed in 40 mL of ammonium acetate (pH 6.8) and shaken for 30 min. The extract was then loaded into a C18 column. After washing with 5 mL of 10% methanol and eluting with 5 mL of 70% methanol, the eluate was concentrated to 1 mL for LC-MS/MS analysis. **Results:** The concentrations of TSNAs in all cigarette brands were higher when determined using the HCl regime than when determined using the ISO regime. Furthermore, the concentrations of TSNAs measured using both the ISO and HCl regimes showed negligible correlation to the tar and nicotine concentrations indicated on package labels. The cigarette samples used in the study were categorized into four classes: ultralow-, low-, medium-, and high-yield brands, which corresponded to 1, 3-6, 8-10, and 14 mg tar/cigarette, respectively. The concentration of TSNAs in ultralow-yield cigarettes was 210 ng/cigarette, as measured using the HCl regime, which was nearly equal to that in high-yield cigarettes (180 ng/cigarette). **Conclusions:** Exposure to TSNAs from mainstream smoke from ultralow-yield cigarettes is comparable to that from high-yield cigarettes. To properly evaluate the risk of smoking, not only the concentrations of tar and nicotine but also those of other chemicals, including TSNAs, should be printed on package labels.

[https://www.jstage.jst.go.jp/article/jjh/67/3/67\\_423/article](https://www.jstage.jst.go.jp/article/jjh/67/3/67_423/article)

[https://www.jstage.jst.go.jp/article/jjh/67/3/67\\_423/pdf](https://www.jstage.jst.go.jp/article/jjh/67/3/67_423/pdf)

**Note:** Open Access. Full text PDF freely available from link immediately above. Body of text in Japanese, but Figures, Tables and References in English.

## Role of cigarette filter on the risk of oral cancer: a case-control study in a Chinese population

[Oral Dis](#). 2012 Jun 22. doi: 10.1111/j.1601-0825.2012.01959.x. [Epub ahead of print]

[Fu J](#), [Gao J](#), [Zhang Z](#), [Zheng J](#), [Zhong L](#), [Luo J](#), [Xiang Y](#).

### Abstract

**Objective:** To determine the role of cigarette filter on the incidence risk of oral squamous cell cancer among male smokers in a Chinese population. **Subjects and Methods:** A multicentric hospital-based case-control study was applied. Three hundred and nineteen male cases and 428 male controls matching for age ( $\pm 3$  years) were identified from January 2008 to December 2010. Detailed smoking histories were obtained by interviews. Logistic regression model was used to compare the influence of filter and non-filter cigarettes on oral cancer risk. **Results:** The adjusted odd ratios (ORs) for oral cancer were 1.30 (95% CI 1.15, 1.48) of filter cigarette smokers, 2.06 (95% CI 1.17, 3.62) of non-filter cigarette smokers, and 1.73 (95% CI 1.33, 2.25) of mixed smokers, as compared with non-smokers. When classified current smokers according to smoking pack year, the ORs of mixed smokers were 2.27 (95% CI 1.06, 4.85) in <20 pack year, 0.81 (95% CI 0.57, 1.14) in 20-39 pack year, and 0.86 (95% CI 0.57, 1.29) in  $\geq 40$  pack year, as compared to filter cigarette smokers. **Conclusions:** The protective effect against oral cancer of cigarette filter was limited, restricted to smokers of small amount of smoking accumulation. For most smokers, the difference was non-significant between filter and non-filter cigarettes on the risk of developing oral cancer.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1601-0825.2012.01959.x/abstract>

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**A randomized trial of a brief intervention to promote smoking cessation for parents during child hospitalization**

[Pediatr Pulmonol.](#) 2012 Jul 10. doi: 10.1002/ppul.22614. [Epub ahead of print]

[Ralston S](#), [Grohman C](#), [Word D](#), [Williams J](#).

**Abstract****BACKGROUND:**

Parental smoking significantly increases the risk of child hospitalization for multiple illnesses. Parenting smokers may not have easy access to smoking cessation services elsewhere and a few interventions with this population in the inpatient setting have shown promising results.

**METHODS:**

We sought to evaluate the efficacy of a brief intervention with smoking parents on smoking cessation rates after child hospitalization with a randomized, controlled trial.

**RESULTS:**

Sixty smoking parents participated in the study. The majority of study participants were uninsured women under age 30 who smoked approximately half of a pack per day. There were no statistically significant differences between control and intervention groups for our outcomes. However, 45% (CI: 33-57%) of all participants reported at least one quit attempt during the 2-month study period and 18% (CI: 10-30%) of participants were quit at study conclusion.

**CONCLUSIONS:**

Willingness to quit smoking was much higher than expected in this population of parenting smokers.

<http://onlinelibrary.wiley.com/doi/10.1002/ppul.22614/abstract>

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**Letter to the Editor****The Framework Convention on Tobacco Control's original sin**

[Public Health.](#) 2012 Jul 5. [Epub ahead of print]

[Brailon A](#), [Dubois G](#).

Lien and DeLand suggested to use the Framework Convention on Tobacco Control (FCTC) as a model for other non-communicable disease control.

This international treaty designed to respond to the tobacco pandemic has an original sin which precludes effectiveness: the lack of a monitoring body for reporting violations. These are enduring and obvious.

France was the first of the old Members of the European Union to ratify the FCTC treaty in October 2004. However, cigarette sales remain steady from  $54.9 \times 10^3$  metric tons in 2004 to  $55.0 \times 10^3$  in 2010 while cross-border purchase increased as rolling tobacco sales. This result is not surprising as the measures implemented for tobacco control appear flawed. A national study in March 2011 showed an increase in prevalence of daily smoking in those 17 y old from 28.9% in 2008 to 31.5% in 2011. This suggests that the government sacrifices its citizens' health to vested interests, for tobacco control as for alcohol control.

Netherlands has weakened existing smoke-free-laws, reversed the support for smoking cessation, and plan to close down the national center on tobacco control (STIVORO).

These governments must be blamed for breaching the article 5.3 of the FCTC which specifically requires protecting public policy from tobacco industry influences.

Neither naivety nor hope can yield compliance and results. *Errare humanum est, sed perseverare diabolicum* (to err is human, but to persist in the mistake is diabolical).

<http://www.sciencedirect.com/science/article/pii/S0033350612001047>

**Referenced *Pub Health* report:**

Translating the WHO Framework Convention on Tobacco Control (FCTC): Can we use tobacco control as a model for other non-communicable disease control?

[www.sciencedirect.com/science/article/pii/S0033350611002770](http://www.sciencedirect.com/science/article/pii/S0033350611002770)

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**Neighbourhood deprivation and outlet density for tobacco, alcohol and fast food: first hints of obesogenic and addictive environments in Germany**

**Public Health Nutr.** 2012 Jul 10:1-10. [Epub ahead of print]

[Schneider S](#), [Gruber J](#).

**Abstract**

**OBJECTIVE:**

The current discussion regarding 'place effects on health' is increasingly focusing on the characteristics of a specific physical environment. Our study investigated whether socially deprived residential areas are more likely than affluent neighbourhoods to provide access to addictive substances and fast food.

**DESIGN:**

In this ecological study the total number of tobacco, alcohol and fast-food outlets was recorded and visualized using a geographic information system. Area affluence was measured through the percentage of parents with children of kindergarten or school age with joint annual taxable income <€12 272.

**SETTING:**

Eighteen social areas in Cologne, Germany.

**SUBJECTS:**

All social areas in four districts in Cologne, Germany, with a total of 92 000 inhabitants, were analysed.

**RESULTS:**

In the investigation area, 339 tobacco, 353 alcohol and sixty-seven fast-food outlets were identified. As area affluence declined the availability of the following potentially health damaging sources increased: cigarettes (Kendall's tau = 0.433; P = 0.012), alcohol (Kendall's tau = 0.341, P = 0.049) and fast food (Kendall's tau = 0.473; P = 0.009).

**CONCLUSIONS:**

The availability of addictive substances and fast food can be seen to have a contextual influence on an individual's lifestyle and can, in the form of physical exposure to obesogenic and addictive environments, contribute to a culmination of health risks.

<http://journals.cambridge.org/action/displayAbstract?fromPage=online&aid=8634266>



**The mediating sex-specific effect of psychological distress on the relationship between adverse childhood experiences and current smoking among adults**

**Substance Abuse Treatment, Prevention, and Policy 2012, 7:30**

Published: 13 July 2012

Tara W Strine, Valerie J Edwards, Shanta R Dube, Morton Wagenfeld, Satvinder Dhingra, Angela Witt Prehn, Sandra Rasmussen, Lela McKnight-Eily and Janet B Croft

**Abstract**

**Background**

Research suggests that ACEs have a long-term impact on the behavioral, emotional, and cognitive development of children. These disruptions can lead to adoption of unhealthy coping behaviors throughout the lifespan. The present study sought to examine psychological distress as a potential mediator of sex-specific associations between adverse childhood experiences (ACEs) and adult smoking.

**Method**

Data from 7,210 Kaiser-Permanente members in San Diego California collected between April and October 1997 were used.

**Results**

Among women, psychological distress mediated a significant portion of the association between ACEs and smoking (21% for emotional abuse, 16% for physical abuse, 15% for physical neglect, 10% for parental separation or divorce). Among men, the associations between ACEs and smoking were not significant.

**Conclusions**

These findings suggest that for women, current smoking cessation strategies may benefit from understanding the potential role of childhood trauma.

<http://www.substanceabusepolicy.com/content/7/1/30/abstract>

<http://www.substanceabusepolicy.com/content/pdf/1747-597X-7-30.pdf>

**Note:** Open Access. Full text PDF freely available from link immediately above.

**Related coverage:**

Childhood Trauma Linked to Adult Smoking for Girls

<http://www.sciencedaily.com/releases/2012/07/120712224628.htm>

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Stan Shatenstein  
Editor & Publisher, STAN Bulletin  
Smoking & Tobacco Abstracts & News  
5492-B Trans Island  
Montreal, QC Canada H3W 3A8  
[shatensteins@sympatico.ca](mailto:shatensteins@sympatico.ca)  
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